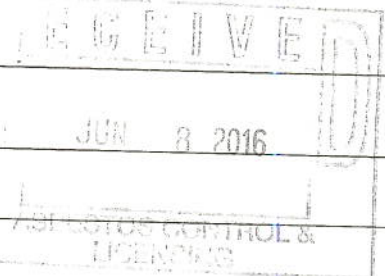


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**State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
(Pursuant to NJAC 8:60 and 5:16)**



Date of Notification (1) 6 / 6 / 16		Name of Building Owner/Operator (2) Boos-Woodbine, LLC	
Agencies Notified <input checked="" type="checkbox"/> EPA <input checked="" type="checkbox"/> DOLWD <input checked="" type="checkbox"/> DHSS <input type="checkbox"/> DCA (NJAC 5:23-8)	Type Notification <input type="checkbox"/> Initial <input checked="" type="checkbox"/> Amended Amendment # 1 <input type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address 410 Park Place	
		City, State, Zip Code Clearwater, FL 33759	
		Name of Contact Ben Elbe	Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Family Dollar Woodbine		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e., private and commercial buildings, homes, etc.)	
Street Address 402 Dehirsch Ave.		Square Feet 2000	# of Floors 2
City (5) Woodbine, NJ 08270		Bldg. Age 100+	
County (6) Cape May	County Code (7)(STATE USE ONLY)	Current Use (Prior if being demolished) Residential	

Name of Monitoring Firm Hired by Building Owner (8) Accredited Environmental Technologies	ASCM No. NA	Name of Abatement Contractor (9) Alliance Environmental Systems	
Street Address 28 N. Pennell Rd.		Street Address 550 East Union St.	
City, State, Zip Code Media, PA 19063		City, State, Zip Code West Chester, PA 19382	
Project Manager for Monitoring Firm Eric Sutherland	Telephone No. 610-891-0114	Telephone No. 610-701-9000	License No. 00508

Start Date (10) 6 / 6 / 16	Scheduled Completion Date (11) 6 / 17 / 16	Name of OSHA Monitor AET	
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Occupancy Status During Abatement (Check only one) <input checked="" type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours - Describe Time of Abatement: 7AM-3:30PM - AM	Street Address 28 N. Pennel Road
	City, State, Zip Code Media, PA 19063

Scope of Work (Check all that apply)

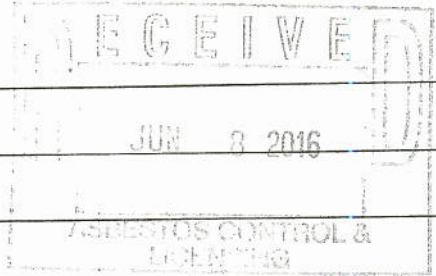
<input type="checkbox"/> ≥ 3 sf or ≥ 3 lf	<input type="checkbox"/> Renovation	<input type="checkbox"/> Full Containment with Negative Pressure
<input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260 lf	<input checked="" type="checkbox"/> Demolition	<input checked="" type="checkbox"/> Mini-Enclosure
		<input type="checkbox"/> Glovebag Procedure
		<input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure

Location of Asbestos-Containing Material (ACM) TO BE ABATED IN Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e., thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Kitchen	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Linoleum	500 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathroom	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Linoleum	100 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Roof Mastic	600 SF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Registered Waste Hauler Richard Burns & Co	NJDEP Waste Hauler ID No. 19955	Cubic Yards of Waste 40	Name of Registered Landfill Western Berks Community Landfill
City, State Phila., PA		Disposal Date TBD	City, State Birdsboro, PA
Completed By (Print or Type) Mark Griffin	Title Estimator	Signature 	Date 6/6/16

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State of New Jersey
NOTIFICATION OF ASBESTOS ABATEMENT
 (Pursuant to NJAC 8:60 and 12:120)



Date of Notification (1) 6/7/16		Name of Building Owner/Operator (2) Colgate Palmolive	
Agencies Notified <input checked="" type="checkbox"/> EPA <input type="checkbox"/> DEP <input checked="" type="checkbox"/> DOL <input checked="" type="checkbox"/> DOH <input type="checkbox"/> DCA	Type Notification <input type="checkbox"/> Initial <input type="checkbox"/> Amended Amendment # _____ <input checked="" type="checkbox"/> Emergency (including justification) <input type="checkbox"/> Cancellation	Street Address 909 River Road	
		City, State, Zip Code Piscataway, NJ 08854	
		Name of Contact Bruce Russell	Telephone Number

FACILITY INFORMATION

Name of Facility Where Abatement is Taking Place (3) Colgate Palmolive		Type of Facility (4) <input type="checkbox"/> School (K-12) <input type="checkbox"/> Subchapter 8 (Other than K-12) <input checked="" type="checkbox"/> Other (i.e. private & commercial buildings, homes, etc.)	
Street Address 909 River Road		Square Feet 200,000	# of Floors 2
City (5) Piscataway, NJ		Bldg. Age 50	
County (6) Middlesex	County Code (7) (STATE USE ONLY) _____	Current Use (Prior if being demolished) Commercial	
Name of Monitoring Firm Hired by Building Owner (8) Accredited Environmental Technology		ASCM No.	Name of Abatement Contractor (9) ecoservices, LLC
Street Address 28 N. Pennell Road		Street Address 407 W. Lincoln Highway, Suite 500	
City, State, Zip Code Lima, PA		City, State, Zip Code Exton, PA 19341	
Project Manager for Monitoring Firm Eric Houseknecht		Telephone No. 610-891-0114	Telephone No. 610-755-7563
			License No. 01161
Start Date (10) 6/8/16	Scheduled Completion Date (11) 6/17/16	Name of OSHA Monitor EMSL	
Occupancy Status During Abatement (Check Only One) <input type="checkbox"/> Facility Closed/Vacated During Entire Period of Abatement <input type="checkbox"/> Abatement Performed Outside of Normal Facility Hours <input checked="" type="checkbox"/> Other - Describe: <u>Work in segregated area 7:00 am - 3:30 pm</u>		Street Address 200 Route 130 North	
		City, State, Zip Code Cinnaminson, NJ	

Scope of Work (Check All That Apply)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> ≥ 3 sf or ≥ 3 lf | <input checked="" type="checkbox"/> Renovation | <input type="checkbox"/> Full Containment with Negative Pressure |
| <input checked="" type="checkbox"/> ≥ 160 sf or ≥ 260 lf | <input type="checkbox"/> Demolition | <input checked="" type="checkbox"/> Mini-Enclosure |
| | | <input checked="" type="checkbox"/> Glovebag Procedure |
| | | <input checked="" type="checkbox"/> Non-Exempted (*) and Non-Friable Procedure |

Location of Asbestos-Containing Material (ACM) TO BE ABATED In Facility (13)	Is Location Normally Used Solely by Maintenance/Custodial Staff? (12)			Description of Asbestos Containing Material (ACM) (i.e. thermal systems insulation, surfacing, VAT, or other miscellaneous)	Amount (Specify SF or LF)	Abatement Type			
	Yes	No	N/A			Removal	Repair	Encapsulate	Enclosure
Old Sodexho Office			X	pipe fitting / saddles	40 LF	X			
Old Sodexho Office			X	floor tile	500 SF	X			
Old Sodexho Office			X	floor tile mastic	1500 SF	X			

Name of Registered Waste Hauler TBD	NJDEP Waste Hauler ID No.	Cubic Yards of Waste	Name of Registered Landfill TBD
City, State		Disposal Date TBD	City, State
Completed by Jack Bally	Title Sr. Project Manager	Signature 	Date 6/7/16